

REMARKS

Reconsideration of the application is respectfully requested.

Claim status

Claims 2-5 and 17 have been amended to depend from claim 24. Support for this amendment is found on page 3, lines 24-27, and in original claims 1-8 as filed. Claim 8 has been canceled without prejudice. No new matter has been added by way of these amendments. Claims 2-5 and 15-25 are pending and at issue.

Obviousness Rejections

Claims 2-5, 8, and 15-23 have been rejected under 35 U.S.C. §103(a) as obvious over U.S. Patent No. 6,184,219 (to Evenden et al.). Claims 2-5, 8, 15 and 16 have been rejected as obvious under 35 U.S.C. §103(a) over U.S. Patent No. 6,169,105 (to Wong et al.). Claims 17-23 have been rejected as obvious under 35 U.S.C. §103(a) over Wong in view of U.S. Patent No. 4,943,590 (to Boegesoe et al.).

While applicants respectfully disagree with the Examiner, in order to expedite prosecution of this application, claim 8 has been canceled without prejudice, and claims 2-5 and 17 have been amended to depend from claim 24. Claim 24 has not been rejected in the aforementioned rejections. Accordingly, these rejections are moot.

Claims 24 and 25 have been rejected under 35 U.S.C. §103(a) as obvious over Boegesoe in view of Wong. According to the Examiner, Wong teaches that serotonin re-uptake inhibitors (SRI's) can treat affective disorders including post traumatic stress disorder (citing col. 13, last line of Wong). Because Boegesoe teaches that escitalopram is an SRI, the Examiner concludes that it would have been obvious to one skilled in the art to treat a patient suffering from post traumatic stress disorder with escitalopram.

Applicants traverse the rejection, and respectfully request reconsideration.

Wong discloses a method for potentiating the action of citalopram, fluvoxamine, or paroxetine in increasing the availability of serotonin, norepinephrine, and dopamine in the brain (col. 1, lines 59-61). The method includes administering citalopram, fluvoxamine, or paroxetine, with a particular active second component (col. 1, line 63, to col. 3, line 43). Wong discloses that the combination of the two components can treat depression, obsessive-compulsive disease, and obesity (col. 13, lines 4-6). The combination is also said to be “useful for treating many other disease, disorders, and conditions as well, set out below” (col. 13, lines 47-48). The list of conditions set out includes post traumatic syndrome.

Even assuming *arguendo* that there was motivation to combine Wong with Boegesoe (which is not admitted here), one of ordinary skill in the art would administer the second active component with escitalopram in order to obtain the most beneficial effects. Wong teaches that the combination has improved activity in treating various conditions and provides a more rapid onset of action than is provided by treatment with the citalopram, fluvoxamine, or paroxetine alone (col. 12, lines 62-66, and col. 13, lines 1-3). One of ordinary skill in the art would have had no motivation to administer the composition without the second active component.

Furthermore, Wong does not disclose or suggest that post traumatic stress disorder can be treated by administering escitalopram as the sole active ingredient (i.e., without a second active component as presented in Wong). Simply because a combination of the two components may be able to treat post traumatic syndrome in no way suggests or implies that one component used alone, in this case escitalopram, could treat the same disorder. The potentiating action of the second active component may be critical for the treatment. Wong in fact teaches that “[t]he increase in availability of serotonin [due to the present invention] is particularly important” (col. 12, lines 66-67).

The Examiner relies on the statement in the background section of Wong that serotonin reuptake inhibitors are “effective in treating numerous other conditions [besides depression]” (col. 1, lines 32-42), and presumes that these “other conditions” are those set out in column 13. The Examiner further presumes that Wong characterizes post traumatic stress disorder as a serotonin-

mediated affective disorder. However, Wong does not specify what these conditions are. Wong also does not teach that citalopram or escitalopram alone are effective for treating post traumatic stress disorder. Wong simply fails to teach a single component treatment regimen.

For the foregoing reasons, Wong in combination with Boegesoe fails to render obvious the presently claimed invention, and applicants respectfully request withdrawal of this rejection.

Provisional Double Patenting Rejections

Claim 8 has been provisionally rejected under 35 U.S.C. §101 for double patenting over claim 8 in parent application no. 10/021,126. Applicants have canceled claim 8 from the instant application. Accordingly, this provisional rejection is moot.

Claims 2-5 and 15-25 have been provisionally rejected under the judicially created doctrine of obviousness-type double patenting over claims 1-5 of parent application no. 10/021,126.

In order to expedite prosecution of this application, submitted herewith is a terminal disclaimer over any patent maturing from U.S. Serial No. 10/021,126.

Conclusion

In view of the above amendment, applicant believes the pending application is in condition for allowance.

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Respectfully submitted,

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